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Deliver to: <u>Najjar, S.</u>	Art Group: <u>2157</u>
Company Name: <u>USPTO</u>	Date: <u>December 20, 2004</u>
Facsimile No.: <u>703-872-9306</u>	Number of pages <u> </u> Including this sheet.
From: <u>Gordon R. Lindeen III, Reg. No. 33,192</u>	Filing Date: <u>12/29/2000</u>
Our Docket No.: <u>42390P10456</u>	
Application: <u>09/752,536</u>	

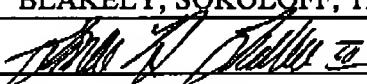
SubjectRemarks

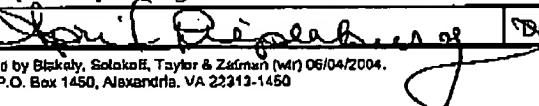
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/752,536
		Filing Date	December 29, 2000
		First Named Inventor	
		Art Unit	2157
		Examiner Name	Najjar, S.
Total Number of Pages in This Submission	12	Attorney Docket Number	42390P10456

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
<table border="1" style="width: 100%; height: 100px;"> <tr> <td style="padding: 5px;">Remarks</td> </tr> </table>			Remarks
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Gordon R. Lindeen III, Reg. No. 33,192 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	December 20, 2004

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.	
Typed or printed name	April Piepenburg
Signature	
Date	December 20, 2004

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005		<i>Complete if Known</i>	
Patent fees are subject to annual revision.		Application Number	09/752,536
		Filing Date	December 29, 2000
		First Named Inventor	
		Examiner Name	Not yet assigned
		Art Unit	2622
TOTAL AMOUNT OF PAYMENT (\$)		0.00	Attorney Docket No. 42390P10456

METHOD OF PAYMENT (check all that apply)

- Check Credit card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	25	25' =	0	x	50.00	=	50.00
Independent Claims	3	3' =	0	x	200.00	=	50.00
Multiple Dependent							

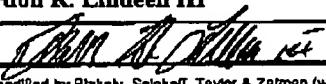
Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	"Reissue independent claims over original patent
1205	300	2205	150	"Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(3)	0.00	

*Or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	150	2051	65
1052	50	2052	25
2053	130	2053	130
1251	120	2251	60
1252	450	2252	225
1253	1,020	2253	610
1254	1,590	2254	785
1255	2,160	2255	1,080
1401	500	2401	250
1402	500	2402	250
1403	1,000	2403	500
1451	1,510	2451	1,510
1460	130	2480	150
1807	50	1807	50
1808	180	1806	160
1809	780	1808	393
1610	700	2810	295
Other fee (specify)		SUBTOTAL (2)	(6)

Complete (if applicable)

Name (Print/Type)	Gordon R. Lindeen III	Registration No. (Attorney/Agent)	33,192	Telephone	(303) 740-1980	
Signature					Date	12/20/04

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (ver 12/15/2004).
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	09/752,536
Filing Date	December 29, 2000
First Named Inventor	
Examiner Name	Not yet assigned
Art Unit	2622
Attorney Docket No.	42390PT0456

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order None Other (please identify): Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims		Extra Claims	Fee from below	Fee Paid
Independent Claims	25	25*	0 X 50.00	\$0.00
Multiple Dependent	3	3*	0 X 200.00	\$0.00

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	"Resissue independent claims over original patent
1205	300	2205	150	"Resissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

*or number previously paid, if greater. For Resissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	150	2051	65	Surcharge - late filing fee or cash
1052	60	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,580	2254	785	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to Institute a public use proceeding
1480	130	2480	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	Filing a submission after final rejection (37 CFR § 1.129(b))
Other fee (specify)		(\$)		
SUBTOTAL (2)		(\$)		

Fee Paid

SUBMITTED BY

Complete if applicable

Name (Print/Type)	Gordon R. Lindeen III	Registration No. (Attorney/Agent)	33,192	Telephone	(303) 740-1980
Signature				Date	12/20/04

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (mr) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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Our Docket No: 42P10456

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

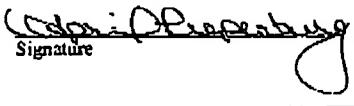
In re Application of:)
 Deshpande et al.) Examiner: Najjar, S.
 Application No: 09/752,536)
 Filed: December 29, 2000)
 For: Method and Apparatus for Adaptive)
Synchronization of Network Devices)

RESPONSE TO OFFICE ACTION

Mail Stop Amendment
 Commissioner for Patents
 P.O Box 1450
 Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed September 22, 2004, Applicants respectfully request the Examiner to enter the following amendment and to consider the following remark.

FIRST CLASS CERTIFICATE OF MAILING	
<p>I hereby certify that I am causing the above-referenced correspondence to be deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and that this paper or fee has been addressed to the Commissioner for Patents, Alexandria, VA 22313</p> <p>Date of Deposit: <u>December 20, 2004</u> Name of Person Mailing Correspondence: <u>April Plecenbury</u></p>	
 Signature	<u>12/20/04</u> Date

Attorney Docket No. 42P10456
 Application No. 09/752,536

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